MAR 31 1916

a

ATTESTATION PAPER.

No. 724180

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... West
1a. What are your Christian names? ..... John Wesley
1b. What is your present address? ..... Hamilton, Ont.
2. In what Town, Township or Parish, and in what Country were you born? ..... Hamilton, Ont.
3. What is the name of your next-of kin? ..... George West
4. What is the address of your next-of-kin? ..... 21 Bruce Ave. Hamilton, Ont. Canada
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... December 14th 1897
6. What is your Trade or Calling? ..... Tool Maker
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Wesley West, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

J. W. West (Signature of Recruit)

Date MAR 31 1916 191 . (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Wesley West, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

J. W. West (Signature of Recruit)

Date MAR 31 1916 191 . (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Lindsay this MAR 31 1916 day of 191 .

(Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of John Wesley West on Enlistment.

Apparent Age 18 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 4 ins.

Chest measurement:
- Girth when fully expanded 32 ins.
- Range of expansion 2 ins.

Complexion Dark

Eyes Dark Blue

Hair Dark Brown

Religious denominations:
- Church of England
- Presbyterian
- Methodist Methodist
- Baptist or Congregationalist
- Roman Catholic
- Jewish
- Other denominations (Denomination to be stated.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.
(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Birth mark just over the right hip.

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for ~~the~~ overseas Canadian Over-Seas Expeditionary Force.

Date MAR 31 1916 191 .

Place Sudbury

Capt.
Medical Officer
109th Overseas Battalion, C. E. F.
Medical Officer

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

John Wesley West having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Lt.-Col. (Signature of Officer)
O. C. 109th Overseas Battalion, C. E. F.

Date MAR 31 1916 191 .

REGIMENTAL DOCUMENTS

S

NAME WEST. JOHN. WESLEY. Pte REGT. NO. 724180 UNIT #2 Gas Unit 109th Battn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		M			~~DEATH~~
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category H
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					Under age
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
2	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)			14613		
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	a F.B. 122		H			
1	m F W 67					

Box 10240

W. 2589
100M-11-19
1772-39-1377

I.D. number No. d'identification	Surname Nom de famille	Given names Prénoms
724180	WEST	JOHN WESLEY

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

Location
Lieu 10240

ARC-1048 (rev. 91)

SURNAME. West.

S.O.S Dis.

15-3-18.-75/2-2

CHRISTIAN NAMES John Wesley

REGL. No. 724180 RANK Pte.

UNIT 109th Bn.

FORMER CORPS Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL West, George

RELATIONSHIP TO SOLDIER Father

ADDRESS 21. Grove Ave. Hamilton Ont.

COUNTRY OF BIRTH Canada Hamilton Ont. DATE Dec. 14th 1897.

PLACE OF ATTESTATION Lindsay, Ont. DATE Mar. 31st 1916

Sailed from Halifax Perr SS Olympic 23/7/16

R/C. 13/2/18-2

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

488/31 CD

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Toolmaker RELIGION Methodist

DESCRIPTION.

APPARENT AGE 18 YEARS 3 MONTHS

HEIGHT 5' FEET 4 INCHES

CHEST MEASUREMENT 32 INCHES EXPANSION 2 INCHES

COMPLEXION Dark EYES Dark Blue HAIR Dark Brown

DISTINGUISHING MARKS Birth mark just over the right hip.

MEDICAL EXAMINATION. PLACE Lindsay, Ont. DATE Mar 31st 1916

No. 724180 · RANK Pte. NAME West, J. W.

T.O.S. 31-3-16. (S.O. 116. of 4-4-16) UNIT 109th Battalion.

M.D. 3.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916. Mar. 31.	1916. April 30.	✓		
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED
JUL 23 1916

Number 424180 Rank Pte

Surname WEST

Christian Name John Wesley

Units 109th Bn Can Inf Theatre of War Eng

Date of Service 31.7.16

Remarks

Latest Address 212 Robert St. Hamilton Ont.

Roll No. a Pag 2845

200m-2-21.M.

724180 Pte West J. W 109th Battn CEF

Will Removed by Regt Paymaster

H. J. Williamson CAPT.
Paymaster, 109th Overseas Battalion, C.E.F.

79402

— 20 —

Perforated sheet for Will from Pay Book of Reg.

No. 724180

Name Pte J. W. West

Unit 109th Batt. CEF

Military Will.

In the event of my death I give the whole of my property and effects to my mother

Mrs. G. West
212 Robert St
Hamilton
Ont
Canada

witness W. Lancaster Capt.
O. C. "A" Coy. 109th. Bn. O.E.

Signature Pte J. W. West

Rank and Regt. Pte 109th Batt

Date Oct 11th 1916

R—122

J.M. Rank Name WEST, John Wesley. Reg'l No. 724180

Unit 109th Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Lindsay, 31st March 1916. Place of Birth Hamilton, Ont.

Name and Address, Next-of-Kin George West.

21 Grove Ave, Hamilton, Ont, Canada. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 10.977
File R.L.
Category Cavl R.

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England per H.M.T. 2810 31-7-16			
8.12.16	ob 109th Bn	SOS on trsfr to 124th Bn	Witley	8.12.16	Pt II DD 343
11.12.16.	ob 124th	SOS " " fr 109th "	"	"	" 267.
29-3-17	12th R Bn	attd from 124th Bn	E Sandling	29-3-17	" 81
29-3-17	124th Bn	SOS to 12th Res. Bn.	Witley	29-3-17	" 83
3-11-17	12th Res	SOS on postg 16ORD	" E Sandg.	3-11-17	" 270 & 242-6/11/17 16ORD
10-12-17	16ORD	On Com. to 16ORD Bn	" W "	10-12-17	" 276.
11-2-18	"	Cease on Com. & SOS. to Canada for disp. by AG	" E "	31-1-18	" 42-

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
	D.O. Depot	For Duty	M.D. 2. Toronto	9/2/18	MR 442

a
724180

ORIGINAL

MEDICAL HISTORY SHEET.

Surname West Christian Name John Wesley

Examined { on 31 day of March 1916
at Lindsay

Birthplace { City or Town Hamilton
County Ontario

Apparent age 18 years.

Trade or occupation Tool Maker.

Height 5 Feet 4 Inches.

Weight 100 Lbs.

Chest measurement { Minimum 31 inches.
Maximum expansion 32 inches.

Physical development Fair

Small-Pox Marks None.

Vaccination Marks { Arm Right One Left Two
Number Three.

When Vaccinated last April 1st 1916

(a) Marks indicating congenital peculiarities or previous disease

None

(b) Slight defects but not sufficient to cause rejection

Age & weight.

Approved by J McCulloch Capt. Medical Officer

Rank 109th Overseas Battalion, C. E. F. M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
1.4.16	Good	J McCulloch M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
6 W B	27/7/17	J D Boyce Capt.
18.4.16	Good	J McCulloch M.O.
25.4.16	Good	J McCulloch M.O.
2.5.16	Good	J McCulloch M.O.
T.A.B. 22.9.16	"	H Boyd.

Enlisted on 31 day of March 1916 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Bn. C.E.F.	724180.		31.3.16.
Transferred to	124th OVERSEAS BATTALION C.E.F. 12th Res Bn.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Wolsey	March 27 4 17	Inoculation	A4 Pte. Cook Cpl

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname West Christian Name John Wesley

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

a

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C.E.F.

DUPLICATE

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

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(1) Name of Overseas Unit which Soldier joins 109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number 724180

(3) Full Name of Soldier John Leslie West

(4) Place of Birth Hamilton, Ont.

(5) Are you married, or not? No.

(6) If married, state,
(a) Full name of your wife Nil.

(b) Present Postal Address Nil.

(7) Are you a widower? No.

(8) Have you any children?

If so, give number of boys and girls Nil.

Also their names and ages Nil.

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes. George West.

If so, state name and address 21 Grove Ave., Hamilton, Ont.

(10) Is your Mother alive? Yes Margaret West,

If so, state name and address 21 Grove Ave., Hamilton, Ont.

(11) If your Mother is a widow No.

Are you her sole support, or not No.

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

None.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

Nil.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

No.

(15) Are you insured? Yes.

If so, in what Company? Prudential Life Insurance Company.

Have you made arrangements for payment of your Insurance premium Yes.

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Lt. Col.
Officer Commanding.
O.C. 198th Overseas Battalion, C.E.F.

Date June 30th. 1916.

Army Form B. 103. Temporary

Casualty Form—Active Service.

Regiment or Corps 124th Bn Regimental Number 724180

Rank Pte Surname West Christian Name John (W.) Leslie

Religion _____ Age on Enlistment _____ years _____ months.

Enlisted (a) _____ Terms of Service (a) Dur W Service reckons from (a) _____

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) Civil —

or Corps Trade and Rate _____

_____ Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
29.3.17.	OC 12th Bn	attached from 124th to 12th Res Bn	East Sandling	29.3.17.	Pt II 81.
3.5.17.	do	T-O-S 12th Res Bn	do.	29.3.17.	Pt II 112.
3.11.17	do	S-O-S to 1st C.O.R.D. as a gunner.	do.	3.11.17	Pt II 270.
6.11.17	1st C.O.R.D	T.O.S from 12th Bn Sandling		3.11.17	Lieut i/c Records 12th Res. Bn. C.E.F. Pt II 242
	"	~~att to 12th Bn~~	"		
	"	~~Leave with att to 124th Bn~~	"		~~Pt II~~
10.12.17	1st C.O.R.D	att to 1st C.O.R.D Burton	"	10.12.17	Pt II 276

Lieut. & Assist. Adjt.
for O.C. 1st C.O.R.D.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-smith, &c.

(B99130) W 15012—5156 J. P. & Co., Ltd. Forms/B103/3.

P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
11 DEC 1917		TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. 293.			
			Commanding	B. Vine Lieut. Col. Canadian Discharge Depôt.	
23 DEC 1917 31 JAN 1918		EMBARKED FOR CANADA FROM LIVERPOOL			
			Commanding	B. Vine Lieut. Col. Canadian Discharge Depôt.	
T.O.S. #2 Casualty Unit Toronto effect from 17/2/18 Part 11 Order #52					
Dis #2 Cas Unit Toronto Ont 15th March 1918 Partll...72					
			M L Bolton Lieut. for.O.C.#2 Cas Unit		

(4) 4

CANADIAN CONTINGENT EXPEDITIONARY FORCE

M. D. 2

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 724180 Rank Pte Name J. W. West

Corps #2 Coy Unit who was* Discharged

On Mch 15 1918, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Dec 13 1917, to Mch 15 1918, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month	110	37	Bal. Cr. from prev. month	12	80
Advances by Cheques No.			Regt'l Pay 93 days at $ 1 c.	93	
Advances by Cheques No.			Field Allow. 93 days at $ 10 c.	9	30
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
Payment on transfer or discharge No. 18547	17	73	Other Credits* clothing	13	
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	128	10	Total	128	10

*Give particulars.

A monthly stoppage of $ (†) has (‡) been paid on account of Assigned Pay for the month of 191 and Sep'n Allce. for month of 191 (to) Assignee

(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of $ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment

(2) if married and if a Separation Allowance Card has been submitted no

(3) cause of discharge authority 0072

(4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 13/3/18

Place Toronto

L. W. Morse
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

100M.—1-18.
H. Q. 1772-33-903.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

1773

19146-J-3.

Name West, J.W.
Surname Christian Name

Regimental Number 724180 Rank Pte.

Address (in full) 212 Robert St., Hamilton, Ont.

Unit 109th Bn.

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay $ per diem: Field Allowance $ per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks: Ineligible, Under Age. Discharged at the request of his parents.

No Documents.

M. F. W. 127.
50M—6 17.
1772 39-1140.

File No. 019146-J 21

WAR SERVICE GRATUITY.

Register No. W 1273

Passed to Dept 8/9/18

Reg. No. 224180 P6

Name West John W

Address 38 Common St East Walpole

Dec'd No. 24 W. S. G. File No.
Award ..... days at $ ..... per day $
..... months at $ ..... per month $
Less P. D. P. Credited $
Out $
Less further debit balance
Net due paid as below

Pay Soldier $

TO SOLDIER			TO DEPENDENT		
	Ag. No	Ch. No	Amount	Ag. No	Ch. No	Amount
0						
1						
2						
3						
4						
5						
Total						

Clerk

Dependent

Address

Soldier not Eligible for W.S.G. discharged at request of his parents P.A.B. ruling 7-10-19
W 67-8-1-20

Pay Dependent $

Days ..... Rate ..... Due .....

Less P.D.P. credited

Less further Dr. Bal. or overpayment.

Net

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1					1			
2					2			
3					3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date.....

file regd
7-1-20

M. F. W. 41
1 0M—7-16
1772-39 889.

Name Pte West J.W.

Regimental No. 724180

Unit 109 Bn

Date of enlistment

Place of "

Married (yes or no) No

Amount of pay assigned monthly $ ~~15 00 pd Feb~~

To whom payable ~~Mrs Margt West~~

SPC ~~2+2 Robert St. Hamilton Ont~~

Name and address of next-of-kin

Date and place discharged ~~Wit adv at Ashfa~~

Reason for discharge no sep allce pm 25-We-38

Character on discharge 8/8/18

Ob 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
								1280								D.O.52 Feb17th-Mar4th
Dec13	Feb15	93	1	93	93	10	930	12 80 13	1280	10	1854	7 17 73		110 37		Dis 00 72 undergo

M. F. W 41
1 0M—7-16
1772-39 889

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

Pte Name West John Wesley

M. F. W. 41
100M-1-18.
1772-39-889.

Regimental No. 724180

~~Name and address of next-of-kin~~ L.P.6. No. W 143.
File No P.M. 25.

Unit 109th Bn.

Date of enlistment

Place of "

Married (yes or no) _____

Date and place discharged

Amount of pay assigned monthly $15 paid to 28.2.18

Reason for discharge

To whom payable Mrs Margaret West

Character on discharge

S.S. Olympic 212 Robert Street Hamilton. Ont.
18.2.18

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	12 12/17							3 16	3 16							Bal from English L.P.6
														4 87		A.R. 16843
														9 73		" " 16540
														14 60		" " 17962
														2 43		" " 18966
														4 87		" " 2810 Boat
														7 30		" " 401
														9 73		" " 787
														30 00		C.D. Halifax.
													30 00			Jan & Feb 1918
							Debit Bal:		110 37						113 53	a/c transf. to #2 Gas Unit
									113.53						113 53	with a Debit Bal:

M. F. W. 41
100M-1-18.
1772-39-889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

L. L. Job 310— & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Mrs. Margaret West
Address 212 Robert St.
Hamilton. Ont.

Rate 15.00 per m AUG 1 1916

By Whom Assigned West. J. W.
Regtl. No. 724180.
Rank Pte.
Corps 109 Batt. "A" Co.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs. Margaret West.

Name of Soldier West, J. W. Pte. 109 Batt.

PAYMENTS. # 724180.

L. L. Job 310.—Req. 6574.

15 00

AUG 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		Y15337	15	
Sept.		X19878	15	
Oct.		X45018	15	
Nov.		O28093	15	
Dec.		L35684	15	
Jan.	1917	Z41390	15	
Feb.		G48244	15	
March		I54039	15	
April		K5598	15	15
May		K12126	15	
June		J19549	15	
July		D26264	15	
Aug.		E33389	15	
Sept.		40348	15	
Oct.		Q45734	15	
Nov.		T54459	15	
Dec.		N63610	15	
Jan.	1918			
Feb.				
March			255	
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.		Remarks.	
Aug.	1918					
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1919					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1920					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Hamilton Ont

NAME AND ADDRESS OF NEXT OF KIN: George West
21 Grove ave Hamilton Ont

RELATIONSHIP OF NEXT OF KIN: Father.

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L NO. 724180 RANK Pte NAME West John Wesley

IF IN PERMT. CORPS WHAT UNIT } UNIT 109th Bn TRANSFERRED TO 124th Bn. DATE 7/1/17 AUTHORITY AO 343, 8.12.16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 12 Reserve Bn DATE 21/4/17 AUTHORITY D.O. 83 29/3

PLACE OF ATTESTATION Lindsay Ont TRANSFERRED TO M.E.A. DATE 1/1/18 AUTHORITY KRC.

DATE OF ATTESTATION Mar 31st 1916 TRANSFERRED TO W.F. Bch DATE 14.12.17 AUTHORITY

ASSIGNED PAY MONTHLY $ ~~15~~ 00/100 DATE EFFECTIVE Aug 1st 1916

PAYABLE TO ~~Mrs~~ Margaret West ~~212 Robert St~~ RELATIONSHIP ~~Mother~~

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE ~~Hamilton Ont~~

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 12/12/17 EFFECTIVE 1/1/18 REASON Discharge to Canada

DISCHARGE DATE AND PLACE 12/12/17 Canada REASON AND AUTHORITY Minor - L.R.O. 2646.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Entered on N.E. Pay Ledger M.T.

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) Checked by J. Milburn

DATE 1916	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
July 31													Balance from Canada																		26 10				
														26 10	26 10																				
Aug 1-31	31	1.00	31		31	10	3	10							34 10	12	9/9/16							97 4				12		24 74	35 46				
														12	30																				
Sept	30		30				3								33	44	30/9/16	76	15/9/16					730	730			15	770	37 30	31 16				S O 259 - 027 day 72
																	30/9/16																		
Oct	31		31				3	10							34 10	115	30/9/16	158	15/10/16					730	730			15		29 60	35 66				
														127 30																					
Nov	30		30				3								33	183	31/10/16							975				15		27 73	43 93				
																287	30.11.16							487											
Dec	31		31				3	10							34 10	234	15.11.16							730				15		27 17	50 86				S O 343 8.12.16 Off 21.1.17
1917																																			
Jan	20	1.10	22												22													15		15	57 86				
			190	30											216 40																				
21-31	11	1.10	12	10											12 10	421	15/1	462	29/1					487	19 47					24 34	45 62				
Feb	28	1.00 .10	30	80											30 80	508	15/2	605	26/2					486	12 17			15		32 03	[illegible]				
																				793	14/3	125 Bn													
																				401	27/3/17	Bn				4 87									
																				819	23/3	125 Bn				21 90									
																										12 17									
March	31		34	10											34 10													15	31	54 25	24 24		✓		Q4005 633° 1/2
																														15	31 24				
April	20		22												22													15		24 74					Trans 12 Res Bn 21/4/17
															31 3 40																				
Apr 21/30	10		11												11 —															—	— 42 24				
May 1/31	31		34	10											34 10	119	30/4							1216				15	375	30 91	45 43				24005 #838 24.4.17
			334	40										26 10	360 50									6813	4624	3894		150 -	11 76	31807	45 43				

724180 Pte West John Wesley

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits
			334	40										26 10	360 50
June 1-30	30		33												33
July 1-31	31		34	10											34 10
Aug 1-31	31		34	10											34 10
Sept	30		33												33
			468	60										26 10	494 70

Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
170	15/5						
264	30/5						
437	30/6	330	16/6				
674	30/8	648	15/8				
568	28/9	496	14/9				

Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
68 13	46 24	38 94		150	11 76	315 07	45 43				
7 30				15							
9 73				~~20~~	101	33 04	45 39				G4005 #1045 - 22/5/17
				15		15	64 49				
9 73	7 30			15	101	33 04	65 55				24005 - 3194 20/7/17
3 87	7 30										24005 #3197 21/7/17
9 73	7 30			15	132	79 58	18 97				
143 55	68 14	38 94		210		476 10					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SER. ALLOCE. ENG.
1917									18 97		
Oct	P Pay	34 10					15				
		34 10		AR #859 15/9/17 12th Res.	12 18				25 89		
Nov.				AR 973. 10/10/17. 12th Res.	9 73		15				
	Pte Pay.	33							24 43		
				AR 984 - 26/10/17 - 12th Res	9 73						
Dec 1	P. Pay 12 days	13 20		" #65 28/11 5th "	14 60		15		8 03		
		46 20			34 06		30				
	Balance transf. to Canadian Liab. account.								13 87		
1918				Balance transferred to N.E. Branch.					21 90		
March				AR 18966 21/1/18 C.O.D. Buxton		2 43					Endorsed
				Adv 7/0 34 N NE 10/13							
				AR 1021 20/12/16 10/60 R.A.F. Charges		7 30					
				6/12/17 Adv 7/0 28 N NE 10/12							
				AR 16540 7/12/17 C.O.D. Buxton		9 73					Endorsed
				adv 7/0 12K NE 10/33							
				AR 16843 24/11/17 C.O.D. Buxton		4 87					Endorsed
				Ad 7/0 12K NE 10/33							
				AR 476 9/12/17 121 C.O.R.D		4 87					Extract 9 73
	Endorsed Transd to "Canada Disc'ge a/c"	17 03		Ad 7/0 11 K NE 10/32							
		17 03				29 20					
April				AR 17962 8/1/18 C.O.D. Buxton							
				Adv 7/0 57 N NE 12/23		14 60					Ind
				AR 787 15/9/17 12th Res							
				adv 7/0 56 N NE 12/22		9 73					Extract
						24 33					
June	Endorsed Transd to "Canada Disc'ge a/c"	14 60									NIL
		14 60									

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SER. ALLOCE. ENG.

A3M. FORM REN.D 13/12/17 EFFD 1/1/18
DISCHARGED TO Canada DATE 13/12/17
PAYBOOK VERIFIED 12/12/17.
BAL. $3.16 L.P.C. REN.D 13/12/17
AUTHY. L.R.O. 2646 (minor)

Checked
Sett. Issued. 27/12/17
Debit Balance. $13 87

Checked
O/S Extracts 21 90

Buxton Sd no 54 - 31-1-18 $13-87 Debit
Endorsed AR 16540 £2
" " 16843 £1
" " 17962 £3
" " 18966 10/-

D.M.S.1394.

PROCEEDINGS OF A MEDICAL BOARD

Dated at March 27th 1917.

No. 724180 RANK Pte NAME WEST J.W.

LOCAL UNIT 124th OVERSEAS UNIT – AGE 17 3/12

Examination held at Welby

DISABILITY.
~~Overseas~~ - Local.
(strike out one)

Immature.

PRESENT CONDITION.

This boy look about age given.
Has no physical disability

BOARD RECOMMENDS:-

A4

1. Fit for duty

2. Fit for duty after weeks' physical training.

3. Fit for Temporary Base Duty weeks.

4. Fit for Permanent Base Duty

5. Discharge

Signatures:-

Lt. Col. President.

Members. H Cowan Capt

APPROVED

Dated March 27th 1917. S Campbell Major

for A.D.M.S.,

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	724180
Rank	Pte
Name NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	WEST John Wesley
Corps (Squadron, Battery or Company)	#2 Cas Unit (109th Bn)(1st CO)
Date of Discharge	15th March 1918.
Place of Discharge	Toronto Ont.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age	17 years 3 months.	
Height	5 feet 4 inches.	
Complexion	Dark	
Eyes	D.Blue	
Hair	D.Brown	Birthmark Rt Hip
Trade	Tool Maker	Tattoo L Arm
Intended place of residence (To be given as fully as practicable.)	212 Robert St Hamilton Ont.	

2. The above-named man is discharged in consequence of

Underage

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Good RWB

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Toolmaker

N.S.E. Comp.

M. F. B. 218. 6-9-1918.

100m.—6-16.
H. Q. 1772-39-113

(OVER)

5. He is in possession of the following number of G. C. Badges:

Nil

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Nil

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....Toronto Ont.

(Date).....15th March 1918.

Commanding N. A. Bolton Lieut.

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place).....Toronto Ont. J. W. West .....(*Signature of Soldier.*)

(Date).....15th March 1918. H. S. Beeman .....(*Signature of Witness.*)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....(*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) 1 years 349 days.

Total 1 years 349 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place).....Toronto Ont.

(Date).....15th March 1918.

(*Signature*) N. A. Bolton Lieut.

For O. C. Casualties, C. E. F., M. D. No. 2

4

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	*(a)* Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	*(b)* Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	*(c)* Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

D.M.S.1394.

PROCEEDINGS OF A MEDICAL BOARD

Dated at March 27th 1917.

No. 124150 RANK Pte NAME West J. W.

LOCAL UNIT 124th OVERSEAS UNIT _____ AGE 19 1/12

Examination held at Wilby

DISABILITY.
Overseas - Local.
(strike out one) Immature

PRESENT CONDITION.

Thin long look above age given
Has no physical disability

BOARD RECOMMENDS:- A4

1. Fit for duty _____

2. Fit for duty after _____ weeks' physical training.

3. Fit for Temporary Base Duty _____ weeks.

4. Fit for Permanent Base Duty _____

5. Discharge _____

Signatures:-

President. _____

Members. _____

_____

APPROVED

Dated March 27th 1917. _____

for A.D.M.S.,

President _____

Members _____

_____

_____

_____ Title _____

_____

For A.C.M.S.

D.M.S.1394.

151221

no card
CR486

PROCEEDINGS OF A MEDICAL BOARD

Dated at March 27th 1917.

No. 124180 RANK Pte NAME WEST J.W.

LOCAL UNIT 124th OVERSEAS UNIT _____ AGE 17 3/12

Examination held at Welby

DISABILITY.
~~Overseas~~ - Local.
(Strike out one)

Immature

PRESENT CONDITION.

This boy looks about age given
Has no physical disability

BOARD RECOMMENDS:- A4

1. Fit for duty _____

2. Fit for duty after _____ weeks' physical training.

3. Fit for Temporary Base Duty _____ weeks.

4. Fit for Permanent Base Duty _____

5. Discharge _____

Signatures:-

Members. [signature] President.
[signature] Capt

APPROVED

Dated March 27th 1917. [signature] Major
for A.D.M.S.,

P.697-25M.
3989-31-10-17.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No. of Acq. Roll	AMOUNT Francs	£	S.	$	¢	Place of Payment.	Name of Paymaster.	Remarks.
~~28/11/17~~	~~465~~	~~–~~	~~3~~	~~–~~	~~14~~	~~60~~	~~West Sandling~~	~~P. W. Boyer~~	
~~7/12/17~~	~~476~~	~~–~~	~~1~~	~~–~~	~~4~~	~~87~~	~~" Chgd Mar 1/18 N.B. Dis~~		
					19	47			
							Chgd Mar 1/19 N.B. Dis		
~~Dec 20 1.16~~	~~401~~	~~Short charged~~	~~£1.~~	~~10.~~	✓	~~charged~~	~~£4.10 instead of £6. Wheat Cant.~~		
~~13/9/17.~~	~~787~~	~~Not chgd.~~	~~£2~~		✓		~~Sandling~~	~~Chgd April 1/18 N.B. Dis~~	
								21 20/0	
+ Debit Notes applied for.									

730
973
203

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment: Aug 1-16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 724180

Rank Pte Promoted Reverted Discharge

Soldier's Name J. H. West

Battalion 109 Battn "A" Co.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Margaret West

Address 212 Robert St Hamilton Ont.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec 31			255	255		acct closed 28-2-18 Soldier returned
Jan	X72309		15	15 W		~~to~~ Canada Olympic 14-2-18
Feb	71970W		15	15	acct	FX. OP 285. HPalen
						MRO 2 13 rdect 22-2-18
						Discharged March 15th 1918 underage
						Hq 649 W 14743 HPalen 10-4-18

M. F. W. 126
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7593.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 79663.